

**BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA**

STATE OF OKLAHOMA, ex rel. JOHN D.)
DOAK, Insurance Commissioner,)
)
Petitioner,)
)
vs.)
)
SAMANTHA LYNN SHEPHERD, a licensed bail)
bondsman in the State of Oklahoma,)
)
Respondent.)
)

Case No. 12-0069-DIS

FILED

APR 05 2012

INSURANCE COMMISSIONER
OKLAHOMA

**CONDITIONAL ADMINISTRATIVE ORDER
AND NOTICE OF RIGHT TO BE HEARD**

COMES NOW the State of Oklahoma, ex rel., John D. Doak, Insurance Commissioner, by and through counsel and alleges and states as follows:

JURISDICTION

1. John D. Doak is the Insurance Commissioner of the State of Oklahoma and as such is charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code 36 O.S. §§ 101-7004 and the Oklahoma Bail Bond Act 59 O.S. §§ 1301-1340.

2. Respondent Samantha Lynn Shepherd (“Respondent”) is a licensed bail bondsman in the State of Oklahoma holding license number 199750.

FINDINGS

1. Respondent failed to file with the Insurance Commissioner her October 2011 and November 2011 monthly bondsman reports for her appointment with Seneca Insurance Company.

2. Based on the above alleged violation, on January 26, 2012, the Oklahoma Insurance Department (“Department”) issued a *Conditional Administrative Order and Notice of Right to be*

Heard fining Respondent Two Hundred Fifty Dollars (\$250.00), which was mailed to Respondent via certified mail with return receipt requested.

3. Respondent received the Conditional Order on February 22, 2012.

4. The Order became final on March 26, 2012, as no hearing was requested, and the fine of Two Hundred Fifty Dollars (\$250.00) became due.

5. As of the date of this Conditional Order, the fine remains unpaid.

CONCLUSIONS OF LAW

The allegations are found to be true and correct, and Respondent has failed to comply with an order of the Commissioner. Under 59 O.S. § 1310(A)(7), the Commissioner may suspend any license for “failure to comply with, or any violation of any proper order, rule, or regulation of the Commissioner.”

ORDER

IT IS THEREFORE ORDERED that Samantha Lynn Shepherd’s bail bondsman license (number 199750) is suspended.

Respondent is further notified that she may request a hearing within 30 days of the receipt of this Order concerning this action, and upon such request, the Oklahoma Insurance Department shall conduct a hearing before an independent hearing examiner. A request for hearing shall be made in writing to Michael P. Copeland, Oklahoma Insurance Department, Legal Division, 3625 NW 56th Suite 100, Oklahoma City, Oklahoma 73112 and **shall include an explanation of Respondent’s actions described herein and any defenses thereto.**

If Respondent does not request a hearing within the 30 days allotted, this Order shall become a FINAL ORDER on the 31st day following the receipt of the Order, and Samantha

Lynn Shepherd's bail bondsman license (number 199750) shall be suspended, and the fine of Two Hundred Fifty Dollars (\$250.00) shall be due.

WITNESS My Hand and Official Seal this 4 day of April, 2012.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA



Michael P. Copeland
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 521-2746
Fax (405) 521-0125

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the above and foregoing *Conditional Administrative Order and Notice of Right to Be Heard* was mailed certified, return receipt requested, on this 5th day of April, 2012, to:

Samantha Lynn Shepherd
2018 W. 9th Street
Stillwater, OK 74074

**CERTIFIED MAIL NO:
7001 0320 0004 4250 4400**


Sherry Standerfer

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

7001 0320 0004 4250 4400

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	



Sent To
 Street, Apt. No., or PO Box No.
 City, State, ZIP+
Samantha Lynn Shepherd
2018 W. 9th Street
Stillwater, Ok 74074
sms/12-0069-DIS/Cond. Ord.

PS Form 3800, January 2001 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Samantha Lynn Shepherd
 2018 W. 9th Street
 Stillwater, Ok 74074
 sms/12-0069-DIS/Cond. Ord.

2. Article Number
 (Transfer from service label)

7001 0320 0004 4250 4400

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 Samantha Shepherd 4-20-12

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

RECEIVED
 OKLAHOMA INSURANCE DEPARTMENT

APR 24 2012

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes